. 1-								Application or Docket Number							
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									10/18/291						
	CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			12					RATE FEE		FEE	7	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		OR.	BASIC FEE	770.00			
TOTAL CHARGEABLE CLAIMS			1 / minus 20=					XS 9=			OR	XS18=			
INDEPENDENT CLAIMS			11	)   minus 3 =		X		X43=		•		V96-			
MULTIPLE DEPENDENT CLAIM PR			RESENT						┪		OR	700-	(N)		
- 1	f the difference	e in column 1 is	less th	less than zero, enter "0" in column 2				+145	4		OR	+290=			
3-3-0 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								TOTAL	٠ <b>ا</b>		OR	TOTAL			
_	3-3-01	Column 1)		(Column 2)			3) SMALL			NTITY	OR	OTHER			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE		
	Total	.12	Minus.	<b>-</b> 2	0 :	^		X\$ 9=	T		OR	X\$18=			
	Independent	• 11	Minus	(/		1		X43=	1		OR	X86=	·		
<u> </u>	FIRST PRESE	NTATION OF M	JUTIPLE	DEPENDENT	CLAIM		1	+145=	†		OR	+290=			
			•			٠.	L	TOTA			~ I	· TOTAL			
(Column 1) (Column 2) (Column 3)								DDIT. FE	E L		· · · ·	ADDIT. FEE			
AENT B	98/10	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	• l'(	Minus	-20	)- '	•		X\$ 9=	1.	. /	OR	X\$18=			
	Independent	NTATION OF MIL	Minus	DEBENDENT	71 0104	= / .		X43=	T		OR	X86=			
				DET ENDENT				+145=	I		OR	+290=	/.		
						•	Ņ	TOTAL DOTT. FEE		البــــــــــــــــــــــــــــــــــــ	OR ,	DOTAL COST. FEE	/		
(Column 1) (Column 2) (Column 3) CLAIMS RIGHEST															
AMENDMENT C		, remaining After Amenoment -		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	П	ADDI- IONAL FEE		PATE	ADDI- TIONAL FEE		
	Total	•	Minus				Γ	X\$ 9=	Π		OR	X\$18=	·		
¥.	Independent		Minus			•		X43=	t			X86=			
	FIRST PRESE	NTATION OF MU	LTIPLE	DEPENDENT (	LAIM		╶┠╴	+145=	╁		)R				
- 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										» L	+290=			
	the "Highest Nur ! the "Highest Nur	nber Previously Pai nber Previously Paid ber Previously Paid	d For IN Id For IN	THIS SPACE IS A	ess than	20, enter "20."	_	TOTAL DIT. FEE in the ap	L			TOTAL DOIT. FEE MA 1.	·		

Petent and Tracement Ottos, U.S. DEPARTMENT OF COMMERCE

FORM PTO-675 (Rev. 10/03)